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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								_	
	Visclosky, Peter, J., ,					O Condidate - FEC. 1	mailionation Al	una la nu	_	
	(b) Address (number and street) Post Office Box 10003	☐ Check if address changed				Candidate's FEC Identification Number     H4IN01012				
	(c) City, State, and ZIP Code						lew	Amended	1	
	Merrillville		IN	4641	1	Statement X (N	N) OR	(A)		
4.	Party Affiliation	5. Office Sough	t			rict of Candidate				
	DEMOCRATIC PARTY	House			IN	01			_	
	DE	SIGNATION	OF PR	INCIPAL	CAMPAIGN	N COMMITTEE				
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	Visclosky for Congre	ess								
	(b) Address (number and street) Post Office Box 10003								_	
	(c) City, State, and ZIP Code									
	Merrillville				IN	46411				
(Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.  NOTE: This designation should be filed with the principal campaign committee.										
NOTE: This designation should be filed with the principal campaign committee.										
	(a) Name of Committee (in full)									
	(b) Address (number and street)								_	
	(c) City, State, and ZIP Code									
	I certify that I have exa	mined this State	ment and to	the best of	my knowledge a	nd belief it is true, correct	t and comple	te.	_	
Si	gnature of Candidate					Date			<del>-</del>	
	isclosky, Peter, J., ,	[Electronically Filed]				01/31/2017				
N	OTE: Submission of false, erroneous	, or incomplete in	formation m	nay subject	he person signir	ng this Statement to pena	lties of 2 U.S	.C. §437g.		

FEC FORM 2 (REV. 02/2009)